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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	PRD-2052USNP
		First Named Inventor	RENZI et al
		COMPLETE IF KNOWN	
		Application Number	
		Filing Date	March 26, 2004
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

USE OF ERYTHROPOIETIN IN STROKE RECOVERY
(*Title of the Invention*)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number
 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/458,193	03/27/2003	
60/477,494	06/11/2003	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented
		Patented
		Patented

I hereby appoint:

Practitioners at Customer Number 000027777 → Place Customer Number Bar Code Label Here

AND

Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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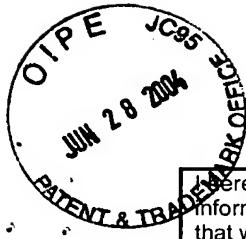
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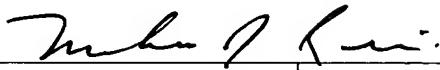
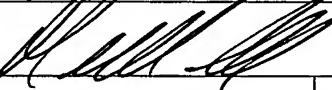
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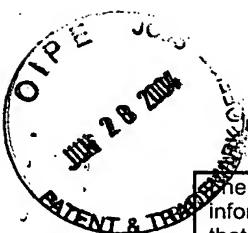
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Michael J.		Family Name or Surname RENZI	
Inventor's Signature			Date 5/25/04
Residence: City Pipersville	State PA	Country US	Citizenship US
Mailing Address 4825 Woodspring Drive			
City Pipersville	State PA	ZIP 18947	Country US
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Michael		Family Name or Surname GOLD	
Inventor's Signature			Date 5/21/04
Residence: City Newtown	State PA	Country USA	Citizenship US
Mailing Address 16 Manor Road			
City Newtown	State PA	ZIP 18940	Country USA
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Kenneth James		Family Name or Surname RHODES	
Inventor's Signature			Date 5/20/2004
Residence: City Hillsborough	State NJ	Country USA	Citizenship US
Mailing Address 808 Atkinson Circle			
City Hillsborough	State NJ	ZIP 08844	Country USA



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NAME OF FOURTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Navneeth		Family Name or Surname	THIRUMALAI
Inventor's Signature	<i>Navneeth Thirumalai:</i>		Date APRIL 15, 2004
Residence: City Kendall Park	State NJ	Country USA	Citizenship India
Mailing Address 72 Maria Court			
City Kendall Park	State NJ	ZIP 08824	Country US
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NAME OF FIFTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Francis		Family Name or Surname	FARRELL
Inventor's Signature	<i>J-X Connell</i>		Date May 5, 2004
Residence: City Doylestown	State PA	Country USA	Citizenship US
Mailing Address 4934 Julie Court			
City Doylestown	State PA	ZIP 18901	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Linda		Family Name or Surname	JOLLIFFE
Inventor's Signature	<i>Linda Jolliffe</i>		Date 6-18-04
Residence: City Belle Mead	State NJ	Country USA	Citizenship US
Mailing Address 16 Davenport Way			
City Hillsborough	State NJ	ZIP 08844	Country USA